

Agency Request Number: _____
Priority Level: High Medium Low
Date: _____ Time: _____ AM PM

Agency Request Form for DISASTER Volunteers – CLEARLY PRINT ALL INFORMATION IN PEN

Agency Information: Note: Agencies must be registered with the Volunteer Center in order to submit a request.

Agency Name: _____

Agency Address: _____

Request Submitted By: (name) _____ Title: _____

Preferred Method of Contact: Telephone _____ E-mail: _____

Fax _____ in-person other _____

Volunteer Opportunity Title: _____

Opportunity Description: _____

Special Requirements: _____

Number of Volunteers Needed: _____ flexible

Opportunity Point of Contact: Name: _____ Title: _____

Primary Phone: _____ Secondary Phone: _____

E-mail: _____ Secondary E-mail: _____

Check all that apply:

Groups welcome Families Welcome Older Adults Handicapped accessible

Youth Volunteers 14 and under 15-18 over 18 Transportation provided: public private

Virtual opportunity: Computer access required Internet access required

Dates and Times:

Start Date: _____ End Date: _____ *SEE PAGE 2 for intermediate/recovery needs*

Days of the Week: Sun Mon Tues Wed Thurs Fri Sat no specific day

Time of Day: morning afternoon evening flexible

Time Details: _____

Opportunity Address Location: _____

City, State, Zip: _____

Directions to the site: Provide geographical landmarks; begin directions at major intersection; sketch a map.

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Agency Name: _____
 Agency Contact: _____ Contact Info: _____

Skills: Please check all that apply. Use this side to request volunteers for intermediate response/recovery needs.

<p><u>ADMINISTRATIVE/ORGANIZATIONAL</u></p> <p>____ 100 Clerical ____ 105 Data Entry/Word Processing</p> <p>____ 110 Telephone Answering ____ 120 Computer/Internet Services ____ 125 Web Site Development ____ 130 Network Administration ____ 135 Database Programming ____ 140 Donations Management ____ 143 Donations Distribution ____ 145 Donations Pick-up ____ 147 Donations Sorting/Packing ____ 150 Bookkeeping - Finance ____ 160 Interviewing ____ 170 Project Management ____ 180 Supervisory Experience ____ 190 Volunteer Recruitment/Coordination ____ 199 _____ (other)</p> <p><u>ANIMAL SERVICES</u></p> <p>____ 200 Animal Foster Care/Rescue ____ 220 Animal Transportation ____ 230 Veterinarian—licensed ____ 235 Vet Tech ____ 240 SART/CART ____ 299 _____ (other)</p> <p><u>COMMUNICATIONS & MARKETING</u></p> <p>____ 300 American Sign Language ____ 305 Spanish ____ 310 Korean ____ 315 Chinese—Cantonese ____ 320 Chinese—Mandarin ____ 325 Urdu ____ 330 Vietnamese ____ 340 Russian ____ 350 _____ (other) ____ 355 _____ (other)</p>	<p><u>COMMUNICATIONS & MARKETING (cont'd)</u></p> <p>____ 360 Amateur Radio Operator ____ 365 CB Operator ____ 370 Public Speaking ____ 375 Phone receptionist/Hotline ____ 380 Public Relations ____ 385 Writing/Editing ____ 390 Training ____ 399 _____ (other)</p> <p><u>CONSTRUCTION & REPAIR</u></p> <p>____ 400 Damage Assessment ____ 410 Metal Construction ____ 420 Wood Construction ____ 430 Block Construction ____ 450 Electrical ____ 460 Debris Removal (Environment) ____ 470 Auto Repair ____ 499 _____ (other)</p> <p><u>COUNSELING & SUPPORT</u></p> <p>____ 500 Bereavement ____ 510 Crisis Intervention ____ 520 Hotline ____ 530 Information & Referral ____ 540 Pastoral Counseling ____ 599 _____ (other)</p> <p><u>CRIMINAL JUSTICE/LEGAL SERVICES</u></p> <p>____ 600 Law Enforcement ____ 610 Insurance Claims Assistance ____ 620 Crime Watch ____ 699 _____ (other)</p> <p><u>FAMILY RELATED SERVICES</u></p> <p>____ 700 Child Care ____ 710 Errand Running/Shopping ____ 750 Personal Finance/Tax Assistance ____ 760 Elderly/Disabled assistance ____ 799 _____ (other)</p>	<p><u>FOOD SERVICE</u></p> <p>____ 800 Preparation/Serving ____ 810 Delivery ____ 820 Sorting/Packing</p> <p><u>HEALTH CARE**</u></p> <p>____ 900 Medical ____ 910 Nursing ____ 920 EMT ____ 930 First Aid ____ 940 Hospice ____ 950 Mental Health ____ 960 Patient Support ____ 970 Speech & Hearing ____ 999 _____ (other)</p> <p><u>TRANSPORTATION **</u></p> <p>____ 1000 Car ____ 1005 Station wagon/mini van ____ 1020 Maxi-van, capacity__ ____ 1030 ATV ____ 1040 Own off-road veh/4wd ____ 1050 Own truck, description: _____ ____ 1060 Own boat, capacity__ Type: _____ ____ 1070 Commercial driver ____ 1080 Camper/RV, capacity & type: _____ ____ 1999 _____ (other)</p> <p><u>All Credential and License verification is the responsibility of the accepting agency.</u></p>
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Volunteer Mobilization Center use only:
 Information taken by: _____ Date: _____ Time: _____ AM PM
 Comments: _____

Request Closed: No Yes by _____ Date: _____ Time: _____ AM PM
 Request Completed Yes No No Referrals Made No longer Needed
 Follow-up: None Needed Yes, Details: _____

Referrals: See Tracking Form